24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 10 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00075820
Check If 24-hour report	ed on Man / Dab / Yayayay
Full Name (Last, First, Middle Initial) of Payee ONMESSAGE INC Mailing Address 2130 PRIEST BRIDGE DR # 11	Date M 10
City State Zip Code CROFTON MD 21114	4400.00 Transaction ID : SE24-0.031977
Purpose of Expenditure MEDIA Category/ Type Name of Federal Candidate Supported or Opposed by Expenditure:	House State: AZ Senate District: 09 President
KTROTER ONVENIA	sbursement For: Primary General Oppose Support General Other (specify)
Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC Mailing Address 815 SLATERS LANE	Date 10 16 2012
City State Zip Code	Amount
ALEXANDRIA VA 22314 Purpose of Expenditure MEDIA Category/ Type Off	Transaction ID : SE24-0.031982 fice Sought: House State: CA Senate District: 36
Name of Federal Candidate Supported or Opposed by Expenditure: RAUL RUIZ Ch	President Oppose Support Oppose
Calendar Year-To-Date Per Election for Office Sought 218904.28	Sbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	185404.28
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
KEITH DAVIS [Electronically Filed] Date	10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y